

# PTSD Defined: Into the Mind of the Warrior

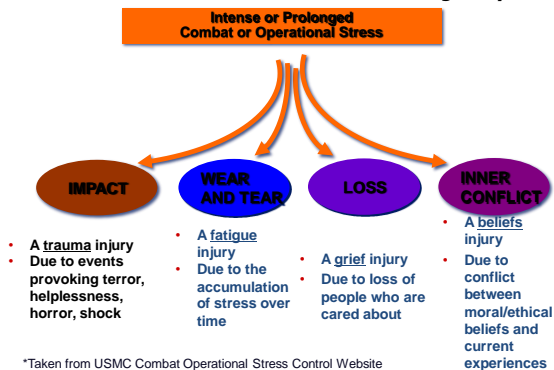
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## Objectives

- Describe sources of stress injury among individuals serving in a war zone
- Describe PTSD and other readjustment issues
- Discuss how “PTSD” in civilian populations differs from that in military populations and ways to remove barriers to care

## 4 Sources of Stress Injury\*



## Impact

- A trauma injury
- Due to events provoking fear, helplessness, horror  
(Criterion A for PTSD)





## Wear and Tear

- A fatigue injury
- Due to the accumulation of stress over time (separation from family, long days, sleep deprivation, difficult living conditions, chronic high stress)
- Physical injuries, insomnia





## Loss

- A grief injury
- Due to loss of people who are cared about



## Inner Conflict

- A beliefs injury
- Due to conflict between moral/ethical beliefs and current experiences







## Military Training/ Experience

- Anticipate Everything
- Plan for Everything
- Control Everything
- Mission Focus/Compartmentalizing
- Emotional Numbness





## What are the effects of operational stress?

### PTSD

- **Reexperiencing** (Unwanted Memories, Flashbacks, Nightmares, Distress with Reminders)
- **Avoidance/Numbing** (Avoidance of thoughts/feelings reminders, Loss of Interest, Detachment, Emotional Numbness, Foreshortened Future)
- **Hyperarousal** (Difficulties with Sleep, Concentration & Anger, Startle Response, Hypervigilance)

### Development of PTSD

Depends on:

- How intense the trauma was
- Death of someone close/injury to self
- Proximity to the event
- Reaction at time of event
- Perceived control over event
- Amount of support after the event
- Personal history (prior traumas, family psych history)

### Physiological Response to Stress/Trauma

Activation of the sympathetic nervous system (fight or flight response)

- Increased pulmonary rate
- More blood diverted to major muscle groups
- Increase in adrenalin, noradrenalin, and cortisol
- Hippocampus/amygdala involvement

## Other Common Issues

- Depression (from loss & inner conflict- associated with highest suicide risk in OEF/OIF vets)
- Other Anxiety (Panic, Anxiety NOS, OCD, GAD- from wear & tear, military training)
- Substance Abuse (etoh, mj, opiates, caffeine, dietary supplements)

## Reintegration Challenges

- Relationship Difficulties (family, friends, civilians)
- Occupational Difficulties
- Ongoing conflicts in Iraq/Afghanistan, politics
- Threat of future deployments
- Physical injuries

## Civilian vs. Military “PTSD”

- Consider the 4 sources of stress injury as well as military training (impact, wear and tear, loss, inner conflict, situational awareness, preparedness)
- Possible TBI and other physical injuries
- Reintegration (Biggest Loser)
- Ongoing involvement in conflicts/politics
- Military Culture: Suck it up and drive on

## “Cover Me” Video

- <http://www.semperfifund.org/resources.html>
- What kinds of barriers were identified that would prevent service members from getting the help they need?

## How can you help?

- Ask the questions
- LISTEN
- Give permission “It’s OK if you’re not OK”
- Ask the questions, again
- Be informed (military lingo, OIF/OEF)
- Repetition, 100% participation
- Advise spouses/loved ones the same
- Remember veterans of all eras





## Summary

- There are several sources of stress and not all paths lead to PTSD (when a vet says “my PTSD...” not the same as what you may associate with civilian PTSD)
- PTSD is an oversimplification of readjustment issues facing returning veterans



## Questions?

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Thanks!!